



FISH DEALER LICENSE APPLICATION INSTRUCTIONS

This application is to be completed and signed by individuals applying for a Fish Dealer license. Businesses requesting a license must have the Responsible Party (business agent) complete and sign the application. The Responsible Party is the person who coordinates, supervises or otherwise directs operations of a business entity, such as a corporate officer or executive-level supervisor of business operations and is the person responsible for use of the issued license in compliance with applicable laws and regulations. Individuals applying for a license for another under the authority of Power of Attorney must submit a **PHOTOCOPY** of the Power of Attorney and current picture identification.

- A. Provide a **PHOTOCOPY** of one of the following current picture identifications:
1. Driver's License; or
 2. State Identification (issued by DMV); or
 3. Military Identification; or
 4. Passport; or
 5. Resident Alien Card (green card)
- B. If you are applying as a business, you must provide:
1. If incorporated, a **PHOTOCOPY** of Articles of Incorporation and list of current corporate holders.
 2. If written agreement partnership, a **PHOTOCOPY** of written partnership agreement.
 3. If not incorporated or written partnership, a **PHOTOCOPY** of current Assumed Name Statements if filed, and a **PHOTOCOPY** of business privilege tax certificates, if applicable.
- C. A **Fish Dealer** Application must have the following:
1. Check one:
 - a. New application (i.e., new license)
 - b. Renewing
 - c. Updating current license / Adding new category to current license
 - d. Replacing a current license
 2. **Fish Dealer** License number. This number is printed on the license to the right of the words *Fish Dealer License* and is the *D number*.
 3. Complete all the applicable Participant Information, including Participant Identification number. This number is located to the right of the word *Participant #* on your license. If you do not currently have a license with DMF, please leave this box blank.
 4. Dealer location (physical address and location where fishermen will be transferring catch to the dealer) **(must be physically located in North Carolina)**.
 5. Records location (physical address where records, including trip tickets, are kept).
 6. Shipping address (address where trip ticket supplies are to be shipped).
 7. See Commercial License and Permit Fee Sheet. If you need assistance, please contact any NC DMF License Office or call (252) 726-7021 or (800) 682-2632.
 8. If purchasing a Fish Dealer License with CLAM or OYSTER categories or a CONSOLIDATED license, you must provide a **PHOTOCOPY** of a valid (not expired) certification as a Department of Environment and Natural Resources Division of Marine Fisheries Certified Shellfish Dealer. For information on certification, contact the North Carolina Shellfish Sanitation Section at 252-726-7021.
- D. Sign the Application.
- E. Certification Statement form completed, signed, and notarized (if new application).

- F. Fees
See Commercial License and Permit Fee Sheet. If you need assistance, please contact any NC DMF License Office or call (252) 726-7021 or (800) 682-2632.
- G. Method of payment: Cash, personal check, money order or Cashier check. Make payable to ***North Carolina Division of Marine Fisheries***. There will be a \$25.00 service charge for returned checks.
- H. The Applicant will be required to report all landings from fishermen on trip tickets at the time and point of landing on trip tickets. Trip tickets must be filed with the Division of Marine Fisheries by the 10th of the following month.
- I. The Applicant must comply with all requests from the Division of Marine Fisheries for all data collection inquiries.

You are required to notify the Division of Marine Fisheries of any address or residency changes within 30 days. Incomplete applications submitted without required documentation will be deemed incomplete and returned to you unprocessed.

Mail to: **North Carolina Division of Marine Fisheries**
 License Office
 PO Box 769
 Morehead City, NC 28557

North Carolina Division of Marine Fisheries

Application for Fish Dealer's License

Check one:	<input type="checkbox"/> New Application	<input type="checkbox"/> Renew	<input type="checkbox"/> Replace
Existing License Number (License number is printed on license)			

Individual or Business Agent Participant Information

Participant I.D.		First Name		Middle Name		Last Name		Suffix	
Check One:									
Driver's License No. <input type="checkbox"/>		State I.D. No. <input type="checkbox"/>		Military I.D. No. <input type="checkbox"/>		Resident Alien I.D. No. <input type="checkbox"/>		Passport No. <input type="checkbox"/>	
No.		Expire Date / /							
Date of Birth		Primary Residence (State)				E-mail Address			
____ / ____ / ____									
Race:	Gender:	Physical Address				Mailing Address <input type="checkbox"/> Check if same as physical address			
	M / F	Address 1: _____ Address 2: _____ City: _____ State: _____ Zip: _____ County: _____				Address 1: _____ Address 2: _____ City: _____ State: _____ Zip: _____ County: _____			
Height	Weight								
Eye Color	Hair Color								
Home Phone:		Business Phone:		Fax:		Cellular Phone:			
() -		() -		() -		() -			

Type of Business Entity (Circle One): Corporation Partnership Sole Proprietorship LLC

Business Participant Information (This section must be completed for the application of a license for use by a business)

Participant I.D.		Business Name:				State of Incorporation:		Charter State:	
Business Phone:		Cellular Phone:		Home Phone:		Fax:		E-mail Address:	
() -		() -		() -		() -			
Business Owner Name (F, M, L)		Physical Address				Mailing Address <input type="checkbox"/> Check if same as physical address			
Business Owner Name (F, M, L)		Address 1: _____ Address 2: _____ City: _____ State: _____ Zip: _____ County: _____ Country: _____				Address 1: _____ Address 2: _____ City: _____ State: _____ Zip: _____ County: _____ Country: _____			
Business Owner Name (F, M, L)									
Business Owner Name (F, M, L)									
Business Owner Name (F, M, L)									

Dealer Location (Physical Address)

Address Line 1:							
Address Line 2:							
City:		State:		Zip:		Country:	
Business Location Phone No.		()		Business Fax Phone No.		()	

North Carolina Division of Marine Fisheries

Application for Fish Dealer's License

Records location (Location or site where records pertaining to fish dealers are maintained) ☐ Check if same as physical address

Address Line 1:					
Address Line 2:					
City:		State:		Zip:	
Phone No:	()	Fax No:	()		

Shipping Address (address where trip ticket supplies are to be shipped) ☐ Check if same as physical address

Address Line 1:					
Address Line 2:					
City:		State:		Zip:	
Phone No:	()	Fax No:	()		

Categories (must indicate which categories you will be dealing in)

Check ALL that apply (Fees - See Commercial License and Permit Fee Sheet. If you need assistance, please contact any NC DMF License Office or call (252) 726-7021 or (800) 682-2632.)

☐ New Dealer

☐ Consolidated License (all categories)
(Requires Shellfish Certification prior to the purchase of this license. Call the Shellfish Sanitation Section at the number below for questions.)

OR

☐ Oysters
(Requires Shellfish Certification prior to the purchase of this license. Call the Shellfish Sanitation Section at the number below for questions.)

☐ Clams
(Requires Shellfish Certification prior to the purchase of this license. Call the Shellfish Sanitation Section at the number below for questions.)

☐ Hard and Soft Crabs

☐ Scallops

☐ Shrimp, including bait

☐ Finfish, including bait

For required dealer reporting instructions or shellfish certification questions call 1-800-682-2632 or (252) 726-7021

Signature: _____

Applicant signature
Must be signed to be valid

Date



North Carolina Division of Marine Fisheries
License or Permit Application Certification Form
(REV 04/2021)

Certification Statement (This section must be completed by Applicant)

OFFICE USE ONLY Year _____

PID # _____

License # _____

DMF License Clerk: _____

I, _____ certify that:

1. All the information provided on this application and any supporting documentation provided is true, accurate, and complete. And further, for renewals, any changes in information or supporting documents have been provided at the time of renewal. I understand that any false information or fraudulent disclosures may result in termination of appropriate licenses, permits and related documents, revocation or suspension of marine fisheries licensing and other privileges, and in possible criminal prosecution.
2. I am a resident of the State of: _____
If claiming resident status in North Carolina, I certify further that (check one):
 - ☐ I have been a legal resident for more than six months, or
 - ☐ If domiciled in North Carolina between 60 days and six months, I have completed and submitted with this application a notarized Certificate of Eligibility for North Carolina Residency.
3. If applying for a Standard or Retired Standard Commercial Fishing License as a North Carolina Resident, I also certify that: (check the appropriate entry)
 - ☐ I filed a North Carolina State Income Tax Return for the previous calendar or tax year.
 - ☐ I was not required to file a North Carolina State Income Tax Return for the previous calendar or tax year.I understand if there are any questions regarding the filing of a North Carolina State Income Tax Return, I may have to provide appropriate tax records, as requested by the Division of Marine Fisheries.
4. For commercial fishing licenses, permits, endorsements or registrations I certify that:
 - a) I currently have no marine fisheries licenses, permits, endorsements, or registrations under suspension or revocation and the privilege to hold such licenses, permits, endorsements, or registrations is not revoked or suspended.
 - b) I have not been convicted of four or more violations in any jurisdiction related to state or federal law or regulations involving or related to marine or estuarine resources during the previous three years.
 - c) I understand that as a condition of accepting a permit from the Division of Marine Fisheries, I agree to abide by all conditions of the permit and agree, that if conditions of the permit as identified for the permit are violated, or if false information was provided in the application for initial issuance, renewal or transfer, the permit may be suspended or revoked by the Fisheries Director.
5. NC General Statute §113-221 requires the NC Division of Marine Fisheries to provide a current copy of the rules governing activities authorized by the license you are purchasing. You have the right to request a current rulebook in hardbound. The document is available on the Division of Marine Fisheries website on the "Rules and Regulations" webpage at <http://portal.ncdenr.org/web/mf/rules-and-regulations>.
6. For for-hire fishing licenses and endorsements, I affirm that I have liability insurance and that I am knowledgeable of USCG safety requirements for the vessel(s) used in the operation in accordance with G.S. 113-168.6.
7. If application is for a Standard/Retired Commercial Fishing License with a Shellfish Endorsement or a Shellfish License for NC Residents I affirm that I have received the required harvester training.
8. For Ocean Fishing Pier License, linear length of the pier has not changed.
9. If applying for a Land or Sell License, I also certify that: (check the appropriate entry)
 - ☐ I have a commercial fishing license issued by the state of _____ (Other than North Carolina).
 - ☐ I have a federal permit that allows commercial fishing.

Signature of Applicant: _____ Date: _____

NOTARY (Only NEW applications must be notarized)

State: _____ County: _____

Sworn to and Subscribed before me this _____ day of _____, _____

Notary Public: _____ My Commission expires: _____